

# MENTAL HEALTH AND DISABILITY SERVICES COMMISSION

June 18, 2015 - 9:30 am to 3:00 pm  
Polk County River Place, Room 2  
2309 Euclid Ave, Des Moines, Iowa  
MEETING MINUTES

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## MHDS COMMISSION MEMBERS PRESENT:

Thomas Bouska	Geoffrey Lauer (phone)
Thomas Broeker	Brett McLain (phone)
Richard Crouch	John Parmeter
Jody Eaton	Rebecca Peterson
Marsha Edgington	Michael Polich
Lynn Grobe	Patrick Schmitz
Representative Dave Heaton	Rebecca Schmitz
Kathryn Johnson	Marilyn Seemann
Betty King	Jennifer Sheehan
Sharon Lambert (phone)	

## MHDS COMMISSION MEMBERS ABSENT:

Senator Mark Costello	Senator Liz Mathis
Representative Lisa Heddens	

## OTHER ATTENDEES:

Theresa Armstrong	MHDS, Bureau Chief Community Services & Planning
Bob Bacon	Center for Disabilities and Development
Sherry Becker	North Iowa Vocational Center
Eva Castillo	Hope Haven
Amy Desenberg-Wines	Iowa Coalition for Integrated Employment
Kristi Dierking	Mid-Iowa Behavioral Health, Marion County
Glenda Farrier	CASS Incorporated
Marsha Fisher	Parent/Guardian
Jim Friberg	Department of Inspections and Appeals
Gayla Harken	Iowa Association of Community Providers
Karen Hyatt	MHDS, Community Services & Planning
Rachele Hjelmaas	Legislative Services Agency
Carol Kraayenbrink	Family Member
Carrie Malone	Iowa House Republican Caucus Staff
Kay Marcel	Family Member
John McCalley	Magellan Health
Teri Olson	Family Member
Caitlin Owens	Center for Disabilities and Development
Peter Schumacher	MHDS, Community Services & Planning/CDD
Amy Wonder	Mosaic
Dana Vasey	Family Member

## **Welcome and Call to Order**

Patrick Schmitz called the meeting to order at 9:36 am and led introductions. Quorum was established with fifteen members present. No conflicts of interest were identified for this meeting.

## **Approval of Minutes**

Richard Crouch made a motion to approve the minutes of the May 20 and May 21 meetings as presented. John Parmeter seconded the motion. The motion passed unanimously.

## **Mental Health and Disability Services Update – by Theresa Armstrong**

Theresa updated the Commission on several Requests for Proposals (RFPs) that MHDS has. The RFP for an inpatient psychiatric bed-tracking system has been awarded to Fiver Points Technology Group. The system they have is called CareMatch and shows all hospitals with inpatient psychiatric programs. CareMatch is a web-based, real time information system. The system will go live on June 29, and The Department of Human Services (DHS) will be providing training sessions on June 22. The system is password protected, but no protected health information will be entered into the system. Searches can be narrowed down by age, sex, current location, and desired care setting.

Michael Polich asked if the system will track substance abuse beds as well. Theresa answered that it will not. The legislation requires that subacute beds be a part of this system as well. This function is not currently built into the system, but it will be added. Patrick Schmitz asked if substance abuse beds could also be added to the system. Theresa said that it is something the Department could explore, but it was not included in the RFP and was not built into the system for the June 29 launch.

Jennifer Sheehan asked if webinar sessions being held at 4pm and 5pm on June 22 cover the same material. Karen Hyatt answered that the sessions are duplicative.

Patrick Schmitz asked which stakeholders will have access to the system. Theresa said that certain hospital personnel, such as security officers and emergency department staff will have access and the ability to update bed availability. MHDS Regions will have access as well as court personnel and county personnel. DHS will allow access to different stakeholder groups as many regions use this system differently. There is no limit to the number of users, so DHS is focused on getting access to anyone who needs it.

The DHS has also awarded grants for the Programs for Assistance in Transition from Homelessness (PATH) program. PATH is a grant program from the Substance Abuse and Mental Health Administration (SAMHSA) which supplies approximately \$334,000 to support services for individuals with mental illness who are experiencing homelessness or at risk of homelessness. In the past Iowa has had six PATH providers, and this year DHS has awarded contracts to seven providers. Grants can only be awarded to providers in metropolitan statistical areas. Iowa has nine areas that qualify under these criteria. The grants were awarded to Abbe Center in Cedar Rapids, The Community Mental Health Center for Mid-Eastern Iowa in Iowa City, Vera French in Davenport, Blackhawk-Grundy Mental Health Center in Waterloo, Hillcrest Family Services in Dubuque, Primary Health Care in Des Moines, and Heartland Family Service in Council Bluffs.

Theresa spoke about Community Mental Health Centers (CMHCs) realigning their practices to better fit the needs of their communities. Blackhawk-Grundy is working more closely with Unity Point to better integrate into the health system and provide care for the whole person. The Abbe

Center for Community Mental Health and the Community Mental Health Center for Mid-Eastern Iowa in Iowa City are merging starting July 1. Theresa said they are not planning on changing their services or moving locations, but combining their resources to better address the needs of their communities.

Theresa said the Health and Human Services budget bill has passed through the legislature, but has not been signed by the Governor yet. The Governor has thirty days to sign the bill or make any line-item vetoes. There is also a one-time funding bill with money for MHDS regions pending.

SF 401: is the bill on subacute services. The law allows subacute beds to be used for involuntary commitments if the individual does not require acute care. The Department of Inspections and Appeals has noticed rules for that. DHS is required to go through a process to determine where the seventy-five geographically dispersed subacute beds will be located. MHDS has a team assigned to the project and is developing a rules package. Theresa said she hopes to be able to bring an update to the Commission at the July meeting. Theresa said she will ask for a committee from the Commission to participate in the development of the rules before they are presented to the full Commission.

HF 468: is a bill regarding Mental Health Advocates. This law makes advocates employees of the counties and gives DHS authority to develop rules on qualifications, reporting requirements, data and quality assurance, and job descriptions. DHS will be working with stakeholders to develop rules including current advocates, county personnel, and judicial staff. Theresa asked the Commission how members would like to participate in the process. Commission members could form a committee separate from the stakeholder group, Commission members could be part of the stakeholder group, or choose to do both.

#### Discussion:

Patrick Schmitz said that he would like to see Commission representation on the stakeholder group. Patrick suggested a provider and a consumer from the Commission participate in the stakeholder group. Jennifer Sheehan said that having providers and consumers at the table will provide valuable input from different perspectives. Betty King and John Parmeter volunteered to participate in the stakeholder meetings.

Theresa asked for clarification on whether the Commission would like to participate in the stakeholder meetings as well as form a committee, or if they would prefer to only participate in the stakeholder meetings. Patrick answered that he felt it would be sufficient for the Commission members to be at the stakeholder meetings.

Representative Heaton asked why providers will be included. Patrick said that advocates can be involved in the process long after an individual is released from involuntary commitment into outpatient status and assist with the transition into case management.

Sharon Lambert asked if it was normal for advocates to work closely with the individuals they represent throughout the entire process from commitment to full release. Patrick answered that the first advocate he had experience with was very involved, but not all advocates participate in the entire process due to a variety of reasons.

Kathy Johnson asked if the purpose of the workgroup was to define the scope and duties of mental health advocates so that there is more consistency across the state. Theresa answered that is one of the intended outcomes of the rules. Representative Heaton said advocates will not

necessarily be working for individual counties. Advocates will be employees of the county, but Representative Heaton said that counties belong to MHDS regions, and the advocates would ultimately be supervised by regional staff.

DHS has contracted with the University of Iowa to assist Southwestern Iowa in the closure of Clarinda's Mental Health Institution (MHI). The University will be providing technical assistance in realigning the regions' crisis services and programs to serve the area.

Theresa said that Iowa Medicaid Enterprise (IME) has been moving forward with the release of Home and Community-Based Services (HCBS) waiver slots. IME released approximately 2300 slots, and have gotten around a 50% uptake rate, which means that approximately 1200 individuals have received slots.

#### **Update on Crisis Stabilization – by Karen Hyatt**

Karen said that last year the Commission contributed to the development of administrative rules on crisis stabilization and response services in the state. As of July 1, 2014, regions are required to provide basic crisis response services, and funding is available to build on and enhance those services. The law that was passed requires crisis response services to be accredited through Chapter 24.

As of June 18, DHS has received three applications for accreditation. There are also four to five other agencies who are actively working on applications and several others who have expressed interest in applying.

Karen said there have been many questions from providers on the requirements. One of the most popular questions has been regarding the staffing requirements. Providers have found hiring to meet these requirements challenging.

Rebecca Schmitz asked about exceptions to policy and when they are being granted. Karen answered that exceptions are considered on a case-by-case basis, and are normally granted in cases where the person in question is nearly qualified and is working on meeting the criteria in the foreseeable future.

Rebecca Peterson asked if four year degrees are required. Karen answered that not all positions require four year degrees. Representative Heaton asked Rebecca about the facility in Fairfield. Rebecca answered that finding qualified staff has been challenging, but the facility is open and running.

Representative Heaton asked how many regions were providing crisis stabilization services. Theresa answered that she did not know off hand which regions were doing what. However, all regions are developing services or have begun to provide services.

Kathy Johnson asked if there had been any concern about the number or availability of mental health first aid training sessions being offered. Karen answered that there are many instructors and that trainings are being held whenever they are requested.

#### **Information Gathering for Annual Reporting and Update on Committee Assignments – by Patrick Schmitz**

Patrick Schmitz asked if anyone knew of information they would like to have from DHS and encouraged the Cost Increase and Communications Committee to request information soon. Tom Broeker said he would gather information for a recommendation. Patrick said he would like

to have budget or revenue projections if available. Theresa Armstrong said that DHS is just starting their planning. DHS bases its projections on maintaining the current levels of services.

Kathy Johnson asked for an updated list of the committee members. Peter Schumacher said he would email a new list to the Commission. Kathy asked if the committees that report every other year meet in the off years. Patrick answered that there is no reason why they could not meet in the off years, and that preparing earlier could ease the burden when it comes time to report.

### **Public Comment**

All members of the Commission received an email from Tami Fenner, the mother of an adult with a mental disability. Tami wrote about her daughter's unfulfilling experience in a sheltered workshop due to being social with people around her. Tami wrote that her family believed a sheltered workshop was the only option for Em. Tami's daughter left the sheltered workshop and started her own business, Em's Coffee Co in Independence, IA. Tami noted that there are no providers of integrated employment services for people with disabilities in her community, and urged DHS to move forward with the proposed rules associated with redesigning integrated employment services.

Amy Desenberg-Wines of the Iowa Coalition for Integrated Employment spoke about supports for integrated employment. Amy said that currently, Iowa's employment services are designed to support facility-based services for individuals with disabilities rather than integrated and competitive employment. Stakeholders have been working to realign employment services so that they will support integrated employment. There was an employment redesign workgroup that had developed recommendations in 2013, and there are draft rules on employment services redesign at the Attorney General's office. Amy said providers of employment services feel sense of urgency with the move to managed care. Amy expressed concern that current reimbursement rates favor segregated employment services over integrated employment, and that rates for integrated employment are not adequate. Amy asked that the Commission help in any way they can to support rules on employment services redesign to be noticed by June 26 and move forward in the administrative rules process so they can be in effect before the end of the calendar year.

Representative Heaton asked if it would be possible for the rules to be noticed by June 26. Theresa said she did not believe it would be possible for the rules to be noticed by that date as there are several steps outlined in code that must be followed before the rules can be noticed. Theresa said it was very important for DHS to look at the final bill as DHS can only write rules on what is signed into law. There is language in the bill related to managed care and rate regulations that need to be finalized to ensure the rules package will comply with Code. Theresa said the department is committed to integrated employment and will move forward when the bill is signed and the Department knows what authority it has.

Kathy Johnson asked if there was a difference between supported employment and integrated employment. Theresa answered that supported employment is a general term, and that integrated employment is a specific model where individuals work in the community as opposed to in segregated supervised workshops.

John Parmeter asked if the rules are in a final form. Theresa Armstrong answered that the Department needs administrative approval and financial approval before they can be noticed. Theresa said the most important step in the process for these rules at the moment is seeing what is finalized by the Governor and making sure the rules match what DHS has been given the authority to do by the legislation.

Patrick asked if the legislation determines funding or if it also determines the structure of services. Theresa answered that there is language on managed care in the bill as well, and managed care language may affect employment services.

Representative Heaton spoke about the work he had done in the legislature to promote integration into the community for individuals with disabilities. Representative Heaton said he hoped that the Governor would recognize the work of the legislature and move forward in a way that would allow these rules to be enacted before the end of the year.

Glenda Farrier of CASS incorporated said she has been working in supported employment services for the last twenty to thirty years. Glenda said that Medicaid reimbursement rates do not currently cover the cost of providing the service. When managed care organizations (MCOs) begin to administer Iowa's Medicaid program in January, the current rates will be continued for the first six months. After six months, providers will be able to negotiate an adjustment. Glenda expressed skepticism that MCOs would be interested in raising reimbursement rates to meet the financial needs of her organization.

Kathy Johnson asked if the legislation changes the payment methodology, and if providers believe they can continue under the current model. Glenda answered that she did not believe organizations like hers would be able to continue without a change in reimbursement. She expressed frustration with the negotiations she has had with managed care in the past. Amy Desenberg-Wines said that if the Governor signs the pending legislation with the funding intact, there would be an increase in reimbursement rates based on the current model, but the rules would redesign the system and place more value on integrated employment.

Patrick Schmitz asked if these rules will come before the Commission to be noticed. Theresa answered that these are Medicaid rules, and would therefore go through the Council on Human Services in the administrative rules process.

Marsha Fisher, a parent of an adult with physical and intellectual disabilities, commented that her son was not satisfied with traditional supported employment. He had difficulty finding work on his own at first, but was able to find a job at Hy-Vee with the assistance of a job coach. He has advocated for himself and obtained work on his own, and is currently working to advance his career. Marsha acknowledges that this is not the norm. Other individuals may need more support from job coaches. She said that currently 80% of employment support funding goes to segregated workshops, and expressed interest in shifting the ratio to even the funding between segregated employment and integrated employment.

A break was taken for lunch at 11:40

The meeting resumed at 12:50

### **Committee Meetings**

The Commission separated into meetings for the Legislative Priorities Committee and the Cost Increase and Communications Committee.

### **Legislative Panel Discussion – by Representative David Heaton**

Representative Heaton said he would give a brief summary of the legislative session and invite questions from the Commission. There was significant pressure from providers who wanted to renegotiate or “rebase” their reimbursement rates before the transition to managed care in

2016. This was difficult because while the state normally sees a 6% increase in overall revenue from year to year, and the prediction for this year was a 2.6 to 3% increase.

Representative Heaton said that there was no sense of competition in the Joint Health and Human Services Budget Subcommittee, and that he, Senator Amanda Ragan as the Senate Co-chair, and the other members of the subcommittee were only focused on drafting the best bill they could.

The legislature passed a bill requiring that regulations on mental health trusts could be no more restrictive than the federal government's. Before, if an individual wished to make a withdrawal from one of these trusts, they would need to get permission from a judge. With this change, a trustee for the account can make a withdrawal on behalf of the individual.

The General Assembly set groundwork for the ABLE Act which would allow individuals with disabilities diagnosed before the age of twenty-six to have savings accounts of up to \$100,000 without impacting eligibility for Medicaid or Social Security benefits.

Representative Heaton said the budget that was sent to the Governor includes funding to establish the Clarinda Mental Health Institution (MHI) as a privately run gero-psychiatric unit. The budget also includes \$6.5 million to operate the Mt. Pleasant MHI for another year. Representative Heaton pointed out that similar facilities are funded on a year-to-year basis, and said he intends that the Mt. Pleasant MHI will be funded in future years as well.

There have been concerns raised by regions on stable funding for MHDS core and core plus services. Representative Heaton said he was approached by representatives of Polk County requesting additional funds for MHDS services. Polk County's levy is at its cap, so they cannot raise any more funds to meet the needs of the growing population. Other regions are having similar issues and relying on more rural counties with lower levies to raise the funds that the more urban counties cannot. Representative Heaton said he plans to work with DHS to find a solution to this issue, and acknowledges that a solution will need to be passed early in the session to be helpful to the regions.

#### Discussion:

Representative Heaton asked Kathy Johnson about a contract signed by Linn County for housing for individuals with serious mental illness (SMI). Kathy answered that she did not have a status report, but some people have been placed. Representative Heaton explained that there are many people in mental health beds who are there because there are no community-based services available to them at the level of support they require. Linn County contracted with a company to meet this need in their area and provide supports to these individuals in the community rather than an institution or group home. Kathy spoke about programs that meet with people before discharge, and follow up with them for sixty days after discharge when they are at the highest risk for to be readmitted into acute care.

John Parmeter asked why mental health is treated differently from physical health, and why we do not mandate mental health coverage for private insurance plans. Representative Heaton answered that people on the Iowa Health and Wellness Plan (IHAWP) and those covered by health insurance plans on the exchange do have mental health coverage as part of their plans. However, private self-insured companies are regulated by the federal government, and the State of Iowa does not have the ability to require covered services.

Rebecca Schmitz asked Representative Heaton how he envisions legislative oversight of Medicaid managed care organizations. Representative Heaton answered that there will be a series of community meetings across the state, and the information gathered will go to the Medicaid Advisory Council who will respond to comments. There will also be legislative oversight committee which will meet quarterly.

Rebecca Schmitz thanked Representative Heaton for his work during the session and for presenting to the Commission.

### **Planning for July Meeting**

Patrick Schmitz asked for more time for Commission committees to work.

### **Public Comment**

Sherry Becker, the Executive Director of the North Iowa Vocational Center (NIVC) in Mason City spoke as a provider and a parent of an individual with a disability. Sherry thanked the Commission for allowing time for her to speak. Sherry all lowans benefit by increasing the number of people working and reducing state expenditures. Last year, individuals served by NIVC working in the community earned \$1.75 million. Currently Iowa's employment support services are designed to provide employment to individuals with disabilities in segregated workshops instead of integrated environments in the community. Often times these individuals earn less than minimum wage. Sherry said she was a part of the Iowa Employment Redesign Workgroup. The Workgroup sent recommendations to DHS in 2013. Sherry said she sent letters to DHS, but did not see positive action taken. Sherry urged DHS and the Commission to take any action they could to help move these rules forward.

Patrick Schmitz asked if these questions have been asked of the Council on Human Services. Sherry Becker answered that she did not know. Representative Heaton asked Theresa Armstrong if it would be legally possible for the administrative rules process to be completed by January 1 without going through an emergency rules process. Theresa said she could not answer definitively because of several steps that need to be taken, however there have been rules that have been implemented in approximately five months in the past.

Teri Olson, the parent of an adult who uses employment services and is a member of Employment First commented. Teri said that segregated employment supports have a place for some people and that integrated employment also have a place for individuals. Teri's daughter was able to obtain a job at a nursing home with the help of a job coach and has benefited from integrated employment services. Teri said several employers support integrated employment of people with disabilities because they have seen savings in the number of sick days taken, and the number of "employee situations" was minimal. Teri asked the Commission to help in any way it can.

Carol Kraayenbrink, who has a daughter with a disability, spoke about her daughter's excitement to be working. She said her daughter works approximately thirty hours a week at a hospital and a YMCA. Her daughter has benefited in many ways by working in the community, and wants people like her daughter to have long-term employment opportunities.

Kay Marcel, the mother of an adult with an intellectual disability, said that in Louisiana, her son had a competitive job, but has been on a waiting list for a job coach since moving to Iowa in November. Kay said her son wants to work, and is able to work, but is unable to get a job coach who could assist him with getting work.



Dana Vasey, who worked at the State Capitol, spoke of a custodial worker with a disability who used to work at the Capitol and lost his position when the program employing him was discontinued. Now the same work is being done by a person without a disability and Dana has noted a drop in the quality of work. Dana said that the previous individual really wanted that job and worked hard at it.

Eva Castillo, a provider of employment services at Hope Haven, asked the Commission to do whatever it could to put them in contact with the correct rule-making body.

Kathy Johnson said the Commission is 100% with the group in the audience. The issue is timing, and the January 1 timeline is very difficult. Jennifer Sheehan asked why the rules were shelved. Theresa Armstrong responded that the rules have not been shelved. DHS is doing a lot of analysis to study the effects of the rules as they need to remain cost neutral. Representative Heaton said the General Assembly passed a different plan than DHS had been developing. DHS is unable to move forward without funding that is included in the HHS budget in front of the Governor. Representative Heaton encouraged the group in the audience to write the Governor and press the importance of the supported employment appropriation in the budget, and urge him to approve the \$750,000 appropriation.

Bob Bacon said that the Council on Human Services will have its next meeting on Wednesday July 8, in Room 1A of Polk County River Place at 2309 Euclid Ave in Des Moines.

The meeting was adjourned at 2:55 pm.

Minutes respectfully submitted by Peter Schumacher.